The Hampden Hippocrat

OCTOBER
1974

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HDMS Woman's Auxiliary President

HAMPDEN DISTRICT MEDICAL SOCIETY

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VOL. XXX, NO. 8 OCTOBER 1974

Contents

The official bulletin
for The Hampden District
of The Massachusetts
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William A. R. Chapin, M.D.

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Your President's Page — "A Salute To The Woman's Auxiliary." 5
Lady Auxiliarians, A Message From Your President 6
Editorial 7
Volunteers — Betty Liljestrand 9
Highlights: HDMS September Meeting 10
Message to Hippocrat — Peggy Lavigne 11
HDMS Announcement 12
Synopsis: Hippocrat Board Meeting 13
Executive Committee Meeting 15-17
Doctors of Literature 18
PSRO 20-22
In Memoriam 24
Woman's Auxiliary Officers 25
Publicity Guide, MMS 26-27
Letters To The Editor 28-29
List of Advertisers 30

THE HAMPDEN HIPPOCRAT is published monthly except for July and August.

The opinions expressed in this bulletin are those of the writers and do not reflect the official viewpoint of the Hampden District Medical Society unless so stated.

Communications pertaining to editorial content should be addressed to the Editor in Chief, 24 Salem Road, Longmeadow, Mass. 01106.

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Warnings: Do not use dietary potassium supplements or potassium salts unless hypokalemia develops or dietary potassium intake is markedly impaired. Enteric-coated potassium salts may cause small bowel stenosis with or without ulceration. Hyperkalemia (>5.4 mEq/L) has been reported in 4% of patients under 60 years, in 12% of patients over 60 years, and in less than 8% of patients overall. Rarely, cases have been associated with cardiac irregularities. Accordingly, **check serum potassium during therapy, particularly in patients with suspected or confirmed renal insufficiency (e.g., elderly or diabetics). If hyperkalemia develops, substitute a thiazide alone. If spironolactone is used concomitantly with 'Dyazide', check serum potassium frequently**—both can cause potassium retention and sometimes hyperkalemia. Two deaths have been reported in patients on such combined therapy (in one, recommended dosage was exceeded; in the other, serum electrolytes were not properly monitored). Observe patients on 'Dyazide' regularly for possible blood dyscrasias, liver damage or other idiosyncratic reactions. Blood dyscrasias have been reported in patients receiving Dyrenium (triamterene, SK&F). Rarely, leukopenia, thrombocytopenia, agranulocytosis, and aplastic anemia have been reported with the thiazides. Watch for signs of impending coma in acutely ill cirrhotics. Thiazides are reported to cross the placental barrier and appear in breast milk. This may result in fetal or neonatal hyperbilirubinemia, thrombocytopenia, altered carbohydrate metabolism and possibly other adverse reactions that have occurred in the adult. When used during pregnancy or in women who might bear children, weigh potential benefits against possible hazards to fetus.

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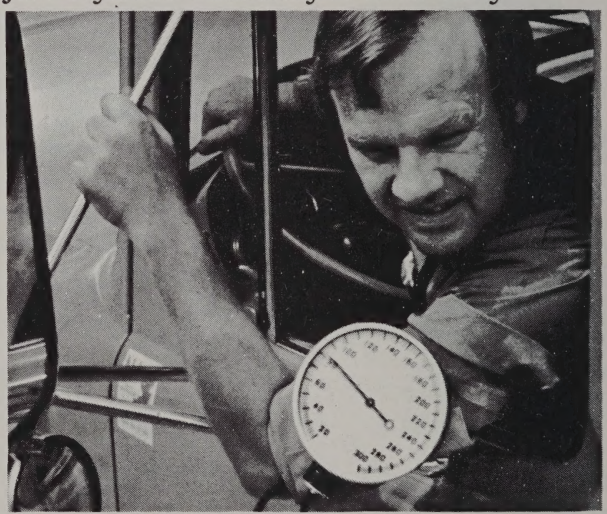

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*E.D. Freis: The Modern Management of Hypertension, V.A. Information Bulletin, 11-35.

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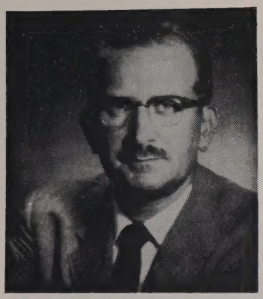

Your President's Page

A Salute to The Women's Auxiliary Hampden District Medical Society

This year we again devote this issue to the theme of the contributions of the Women's Auxiliary to the function and growth of the Medical Society. While many of their activities have been of a social nature, they have delivered programs directed to the general well being of our communities.

With the rapidly changing picture of medical practice and the delivery of health care, it appears that "women power" is a most important factor that has not approached its true potential. As Mike Royko stated in the Chicago Daily News, July 14, 1972, quote "I don't know if the politicians realize yet what a political force women have become. They've been preparing for years with their PTA work, charity drives and community organizations. A determined woman with a list of names and a telephone can be awesome, especially those who know they have a brain but never had a chance to really use it."

Women power is one of the health care systems greatest assets. While woman's prime task has been in the care and development of the family unit, they should also be concerned about the health of their communities and the well being of the health care institutions serving these communities. To this end they must be aware of the programmed changes planned for the health care system. This requires knowledge of impending legislation, both state and federal, including the pros and cons of the various issues. Methods to effect such legislation for the common good must be worked out so that there is widespread understanding in the medical community. Only with this knowledge can we work toward a better society. I would like to suggest that the Women's Auxiliary to the Hampden District Medical Society make medical legislative matters one of their prime concerns over the coming crucial years.

BERNARD BLOOM, M.D.
PRESIDENT, HAMPDEN DISTRICT MEDICAL SOCIETY

Lady Auxiliarians, A Message From Your President

In the history of our country, we have never experienced the ramifications of the political turmoil in which we find ourselves. What the future holds at this time is not clear. Drastic changes are imminent not only in politics but also in the delivery of health services.

A quarter of a century ago, the Woman's Auxiliary to the Hampden District Medical Society was founded on the assumption that physicians' wives had the potential to make vital contributions to civic and social progress. During this same span of years, the Medical Society and Auxiliary have joined forces in the struggle to keep health care from excessive political control.

One has only to peruse its history to discover what the objectives of the Auxiliary are:

1. To further the purposes of the Hampden District Medical Society.
2. To promote a good will among physicians' families and to stimulate local cooperation.

Chronicles attest to the success of scholarship fund raising, health career recruitment, assisting with public health projects, hospitality for new and prospective members and educational and entertaining programs for the general membership. In the recent past, lectures and seminars on the entire life cycle cosponsored by your Auxiliary, the State Auxiliary and Springfield College were well attended by people engaged in health sciences as well as physicians' wives and other homemakers of our community.

Looking ahead to the ensuing year not only must we support the White Cap Ball, an art exhibition and auction to benefit the American Medical Association Education and Research Foundation, assist with state-wide health education programs but we must become cognizant of National Health Insurance, P.S.R.-O.'s, H.M.O.'s and any future proposals from Congress.

The ultimate goals of all our efforts will be to promote health education of the public in order to improve their quality of life and to champion quality health care for everyone at the least expense.

Pat Twible

Mrs. Ellsworth A. Twible, President
Woman's Auxiliary to the Hampden District Medical Society

* * *

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Editorial:

As before, *The Hampden Hippocrat* is devoting this issue to the ladies in the Woman's Auxiliary to the Massachusetts Medical Society from the Hampden District. There are 311 active members, most of whom are the wives of the physicians in the District. One should note that each District has an auxiliary group but like the physicians these groups are part of the whole, the Massachusetts Medical Society. Your Editor-in-Chief is quite fortunate to have the happy honor of having his spouse the president elect for the Hampden District. He was very pleased that some of his ideas of duty to organized medicine were and are shared by her. Needless to say, the entire auxiliary has his support and that of the entire Editorial Board of the Hippocrat.

Next month, we physicians will have an opportunity to do "one of our things" at the White Cap Ball. Not only will we be able to physically participate in the old/new "touch dancing craze" but we can assist the cause of nursing education and the community by taking our auxiliarians thereto. The word which has filtered back indicates that the arrangements committee has done a tremendous job to make your evening enjoyable at the Kimball Towers on Saturday, November 2. A gallery of prizes will be distributed to the attendees. If you are unable to attend, a contribution to aid the worthwhile cause would be appreciated.

Perhaps this is a good time to just thank our wives for all that they do to make our lives better and happier. From a good breakfast to a cheery "glad you are home" or "I'll wait up" fills our day and in turn we pass this love on to our employees and patients. In the rush of coming and going, of running a practice, of competing with disease or poverty, we often forget what a source of comfort and strength are our wives. Although not up to Woman's Lib standards, Robert Burton's comment that "Man's best possession is a good wife" is very true, especially if you don't just list her as a possession! Said in another way, Proverbs 18:22 "Whoso findeth a wife findeth a good thing." Perhaps the physicians of Hampden District should sponsor a *Good Wives' Day* a la Mother's Day. On this day we could make the time and the effort to formally say thank you. The public, our patients, would then know that although not visible in our offices, our wives are very dear to us and in their way make our practices better and enable us to spend more time with our patients. Truly an unselfish act for all to know and praise.

Ladies, from Hippocrates to the newest graduate, we physicians do realize the wonderful contributions you make for and to our practices. We want to thank you for your devotion to our cause—Better Medicine for All. Therefore, physicians, recite this to your auxiliarian:

The Lord in His wisdom made he and she,
  And I'm very glad He gave you to me.
For now as we travel this life's byways,
  I have you to love and brighten my days.

W. E. Stevens, M.D.
Editor-in-Chief

* * *

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To The Doctors and Wives of the Hampden District Medical Society

When my husband and I were in Russia, we asked many questions. Our young lady guide answered patiently, but was most insistent about impressing us that there are no idle housewives in Russia, that everyone works. Suddenly, as though emphasizing the point, she turned to me and said, "And what do YOU do?"

I asked if she knew the meaning of the word "Volunteer." She hesitated, so I defined it. Then I added that there are many women in America who don't go to a job for pay each day, but work just as hard without pay, giving time and effort through organizations for the betterment of our country and its people. I explained that organizations are groups of people whose interests and wishes are similar.

She was intrigued at the idea, and asked many questions. I told her that I work with one such organization which is composed of 90,000 doctors' wives whose interest is to help people with their health needs. I spoke of the many programs and projects of the Auxiliary, giving specific examples of past accomplishments.

When I had finished, our guide said, with considerable amazement, "You work very hard! That's good, for it is not decent for one to live off of the work of another. Everyone must produce."

Volunteerism was a new idea for her, since she had grown up under total state supervision. But it's certainly not new to doctors' wives. The ones that I know are intent on improving life, and realize that their efforts produce more with organization and direction. This is the Auxiliary's function. It opens the way to put our humane instincts to work.

Have you offered the opportunity of membership to every potential member in your district? Please do invite them to

JOIN US—WE CAN DO MORE TOGETHER

Mrs. Howard L. Liljestrand, President
Woman's Auxiliary to the AMA

Betty Liljestrand

Highlites from the Society's General Meeting Held at The Colossevm, Tuesday, September 24, 1974

The Fall Meeting of the Hampden District Medical Society was called to order by its president, who then conducted its business session. Details of which are available for review in the society's offices. The business was followed by a pleasant social hour and good dinner, at which . . . members and friends participated.

Dr. Malcolm C. Todd, the president of the American Medical Association, was the guest speaker and he covered a range of subjects. He pointed out that the Massachusetts delegation may lose one member in the AMA's House of Delegates, since our state is one in which AMA membership is low and does not require that state membership be complemented with national membership. He reiterated the important point that membership bring representation to the House of Delegates and that this is how to make a complaint or a need for a change in attitude heard and have it acted upon. The old adage of lighting a candle instead of cursing the darkness! The AMA lobby in Washington is the major source of facts for the Congress and does represent a worthwhile ongoing action. It fought and helped win the battle to unfreeze health care prices and wages.

The AMA is for National Health Insurance. It will support a program where individual rights are maintained and wherein private enterprise is favoured. All recognize the inflationary nature of a NHI program and its final interpretations will be directed against this problem. Again the membership must discipline those within its ranks who constantly overstep prudent fees. These practitioners are always cited and by inference drag all of us along. The AMA rides herd on the figure pushers in the Congressional committees and attempts to keep all informed of the real state of physicians' fees and costs.

"PSRO concepts will be enhanced by judicious amendments, not repeal, and we all should work with the existing law" was another point in Dr. Todd's message. He also pointed out that the Kennedy-Mills version of NHI would raise the social security tax rate to 15%. It would require a higher base and thereby would hurt the people who needed it the most, the lower and middle income classes. Another point was that foundations should stay close to the county medical societies which nurtured them. Each can assist the other in many complementary ways. A final point was on relicensure which he is not advocating, rather he stressed the need to augment continuing medical education programs.

After a brief question and answer period the meeting was adjourned. Mrs. Todd was present and she is a most delightful woman. She is proud of her husband and delighted that both of them can serve American Medicine this year. It is good that organized medicine has such a delightful pair as its first lady and physician.

Respectfully submitted,
The Editor-in-Chief

A Message To The Hampden Hippocrat

It is with appreciation that I write a short message to all of you in the Hampden District, a very choice part of Massachusetts. I spent many pleasant days years ago in the Connecticut Valley town of South Hadley and it has been one of the nicest fringe benefits of this office to be invited to travel to your beautiful part of the state and to have the opportunity to meet and enjoy so many of you. Thank you for your help and support and always your kind hospitality.

It is an honor to be a part of the Auxiliary at the time when your own Dr. Ayres is serving as President of the Medical Society. We hope he will always find the Auxiliary a true help to him in his endeavors. Auxilians throughout the state have been asked to make an all-out effort to cooperate with Dr. Ayres and the Medical Society in an educational program to call to public attention the need for immunization of pre-school children. Levels of immunization, according to the latest statistics, are dangerously low and it is a responsibility for those who know what this means to pitch-in with this program.

In early 1975 the Auxiliary will help the Medical Society in another effort at Prevention by conducting a "poster or other visual art" contest on the subject of "Anti Self-Pollution." The best results in both programs can be achieved in a cooperative effort of all Auxiliary members.

The Massachusetts Medical Society Auxiliary was incorporated in August 1969. Its purposes are stated as follows:

"To federate and bring into one compact organization all the woman's auxiliaries to the various district medical societies of the State of Massachusetts and to form a constituent society of the Woman's Auxiliary to the American Medical Association.

Through its members to extend the aims of the medical profession to all organizations which look to the advancement of health and education.

To promote harmony and good fellowship among physicians' families.

To coordinate and advise concerning the activities of component auxiliaries.

To participate in any endeavor upon request of the Massachusetts Medical Society."

Through its state chairmen and the office at 22 The Fenway, the Auxiliary will remain committed to direct service to the public via its Free-Loan Film Library, Continuing Education Program and information service, exhibits and speakers regarding careers in the health field.

We thank all physicians' wives for their membership and physicians for their support of our Health Education and Health Service projects.

Peggy Lavigne

Mrs. Richard J. Lavigne
President Woman's Auxiliary
Massachusetts Medical Society

Ernest A. Byron, Jr.

SPRINGFIELD

NEXT MEETING

of the

HAMPDEN DISTRICT MEDICAL SOCIETY
and Springfield Academy of Medicine
Tuesday, December 10, 1974

Business Meeting	6:00 P.M.
Social Hour	7:00 P.M.
Dinner	7:30 P.M.
Cost:	$8.00 per person

to be held at the Yankee Pedlar Inn, Opera House
Holyoke, Massachusetts

Speaker: Richard H. Egdahl, M.D., Director
Boston University Medical Center

Invite and bring your wife with you to this meeting.
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Carl W. Janovsky, M.D., Secretary

*If you must cancel your dinner reservations, please call the office before noon on Sept. 24, 1974.

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Synopsis

of The Hampden Hippocrat Editorial Board Meeting

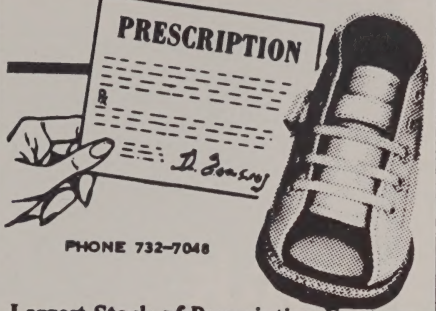
Four of the associate editors: Drs. Allan, Bloom, Sheffield and Simpson; the assistant editor—Dr. Stoddard; business manager—Dr. Greenspan; the advertising director—Mrs. Willard; and the executive secretary of the HDMS met at the Highpoint Motor Inn on Monday, the 30th of September, 1974. The Guiding Principles of the Hampden Hippocrat (1969 revision) were reviewed in an attempt to define who and what constitutes the Editorial Board; the question will be referred to the Executive Committee of the HDMS; as will the request to enlarge the number of associate editors to twelve. This will provide room to include past contributors and editors at the Board meetings, so their input can continue to be utilized.

The November issue will deal with the results of that month's elections and the import to medicine. Several sources will be tapped, such as Common Cause and the League of Women Voters. Dr. Allan will also see what may be available from Baypac offices. The October issue will, as before, be dedicated to the HDMS Woman's Auxiliary.

Raw material will be carried to the Comp House to speed the time between input and distribution. The blueprint will be reviewed by Mrs. Purdy and Mrs. Willard before final detail approval. Deadlines are not being met, especially the receipt of the raw material. This must be in the editor's hands by the 20th of the month *preceding* the issue.

Respectfully submitted,
The Editor-in-Chief

We have just what the doctor ordered!



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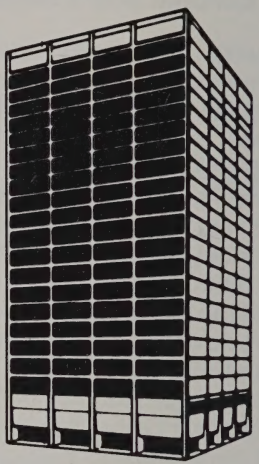

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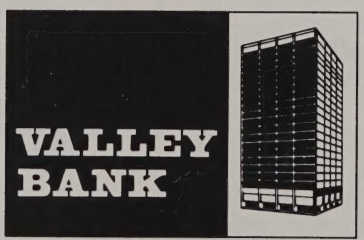

CONVENIENCE

Executive Committee Meeting

September 10, 1974

The Executive Committee convened at 7:00 P.M. on Tuesday, September 10, 1974 in the Conference Room of the Society.

Present were Drs. Bloom, Zacarian, Janovsky, Kraus, Kelley, Cox, Teale and Mrs. Purdy.

The minutes of the June meeting were read and upon motion duly made and seconded were approved by the committee.

Correspondence

Two letters have been received concerning Acupuncture. The first from a local physician, who is practicing acupuncture in Springfield wrote to Dr. Bloom stating his qualifications. The second letter was from Dr. Gephart with enclosures from medical societies in Connecticut complaining about physician acupuncturists practicing and advertising in Connecticut. A physician member of the Hampden District Medical Society who is transferring to Hampshire District had a paid advertisement in the local newspapers. After discussion, it was felt that a letter should be written to the Attorney General and the Consumer Protection Division regarding guidelines to handle this practice.

Last year the Hampden District Medical Society contributed to the education station, Channel 57. It was felt by the committee that this is a worthwhile contribution and by unanimous vote a contribution will be made this year.

As a result of a statement made by the Board of Regents of the American College of Surgeons regarding the inclusion of chiropractors' service in medicare and medicaid, Dr. Bloom made a statement to the Springfield Union in July.

Harcom Associates have offered to help with any Public Relation Project. The committee suggested that they be contacted for the special edition of the Springfield Republican of October 13, 1974.

Dr. Joseph Kelly, President of Medical West wrote the society in June informing them that they are requesting federal assistance from HEW for an HMO. If funds are awarded the officers of Medical West would like to meet with representatives of the Hampden District Medical Society.

Old Business

Mr. Richard Thomas, realtor, who tried to stop the telephone charge increase had been in touch with the Hampden District Medical Society office. A concerned member-physician also wrote about the rate increase. Mr. Thomas hoped to ask for another public hearing but the increase took place as of September 1, 1974. If further hearings are held, Mr. Thomas indicated that individuals are needed to testify. He will inform the Hampden District Medical Society if this takes place.

The request by the Hampden District Medical Society to the Massachusetts Medical Society to hold at least one meeting of the Council outside of Boston is listed in the Advanced Circular of Information and will be voted at Council on October 10, 1974.

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Mrs. Purdy gave a report on the activities of the Medical Exposition. Jon Foley of Eastern Production has informed her that the exposition will be held as more exhibitors are expected to participate. The necessary arrangements will be made for the meeting which will include inviting other health oriented associations.

The Hampden District Medical Society had asked the Massachusetts Medical Society Ethics and Discipline Committee if it is ethical for a group of physicians to employ a public relations person. The Ethics and Discipline Committee ruled that such a group may have such a person but should abide by the Principles of Medical Ethics as to release of public information, press codes, etc.

As a result of two councilors resigning, namely, Dr. Cloud and Dr. Stevens, Dr. Bloom will appoint two to replace these men. After approval by the Executive Committee, their names will be sent to the Massachusetts Medical Society. Dr. Richard J. Miller has replaced Dr. Paul T. Moore as Dr. Moore has been made chairman of the Finance of the of the Massachusetts Medical Society and according to the by-laws, all chairmen of standing committees are automatically members of the council.

As a result of a physician from Holyoke calling the Hampden District Medical Society office, Mrs. Purdy wrote the New England Telephone Company reminding it about the rules of telephone listings for physicians in its yellow pages. This has been done many times before but with no better results.

The resolution made by Dr. Mosig at the February 5, 1974 District Meeting was again discussed at great length. Rulings from both the attorney of the Massachusetts Medical Society and the attorney of the Hampden District Medical Society were read. It seems that there is no definite action for resolving the question. Therefore, upon motion duly made and seconded, it was voted to send this to the Attorney General for ruling.

Congressman Boland was invited to speak at the 135th anniversary meeting in February of 1975. Mr. Boland replied that he may be busy in Congress at that time. Dr. Bloom suggested that Mr. Milstein, the attorney for the Hampden District Medical Society be invited to speak on malpractice. Therefore, at the February meeting, there may be two speakers.

Dr. Asinas and Mrs. Purdy are working on the special edition of the newspaper that will be printed on Health Care in Western Massachusetts.

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New Business

Minutes of a meeting held by the Committee on Foundations of the Massachusetts Medical Society were read and discussed. Reports of these meetings will be sent to the districts as held.

Dr. Bloom suggested that a Long Range Planning Committee be formed. Suggestions were made as to purpose, evaluating the present committees and their functions. Representatives from the Foundation, the three medical societies of Western Massachusetts and others will be members of the committee.

The weight control center was discussed.

The Y.M.C.A. is holding a Hypertension Screening Clinic. Dr. Teale will suggest changes in the format.

Upon motion duly made and seconded, it was voted to send Mrs. Purdy to the Clinical Convention in Portland, Oregon if Dr. Moore felt it could be afforded. Also upon motion duly made and seconded, it was voted to send Dr. Bloom, Dr. Cox and Mrs. Purdy to the Leadership conference in Chicago in January of 1975.

A physician in Chicopee sent a folder to the Executive Committee about Medical West which was enclosed in the Chicopee electric bill. Medical West will be contacted.

Dr. Fortin wrote asking to speak to the Executive Committee. He will be invited to the October meeting.

The meeting was adjourned at 9:25 P.M.

Carl W. Janovsky, M.D.

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Doctors of Literature

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What did Robert Bridges, Sir Ronald Ross, Sir Henry Head, Oliver St. John Gogarty, John McCrae, William Carlos Williams and Merrill Moore have in common? They were poets, and also they were physicians.

And then there were Francois Rabelais, Tobias Smollett, and Georges Clemenceau (who made his mark in other fields) and William Henry Drummond and William James. They, too, were trained in medicine, and were accomplished writers.

When it comes to writing about birth, life and death, or when it comes to describing human strengths or human frailties, or when one wishes to discuss social, educational or political issues, there is no one with a broader background, or a more basic knowledge of the fundamentals than the well trained physician.

So if our colleagues can write novels, poetry, drama, criticism, essays and history, and in addition turn out an enormous mass of not invariably well composed scientific verbiage, why not you?

Who? Me? Yes you! The Hippocrat needs a broader base. It needs a broader base of providers and of consumers. It needs a wider readership, but it also needs more doctors to write articles, letters and comments. It needs to present a greater spread of ideas, concepts and opinions. There is a lot of action in modern medicine at the present time, and there should be a lot of lively discussion.

For anyone who is diffident about his ability to turn out deathless prose, or is shy and fretful about his syntax, let him be comforted by an item that appeared, quite some time ago, according to an undocumented legend, on the bulletin board of the Hippocrat office.

> If punctuations trouble you,
> Or spellings with v or w,
> Or if you are confused about the pause before the clause;
> Relax! because the editors,
> Ignoring all their creditors,
> Have spent their mornings, noons and eves correcting little flaws.
>
> So seize your quill and dip it deep,
> And ask the Lord your soul to keep,
> And cast your flask upon the seas of literate renown.
> Wally will mind your p's and q's
> And never ever change your views,
> And suddenly you'll find that you're the toast of all the town.

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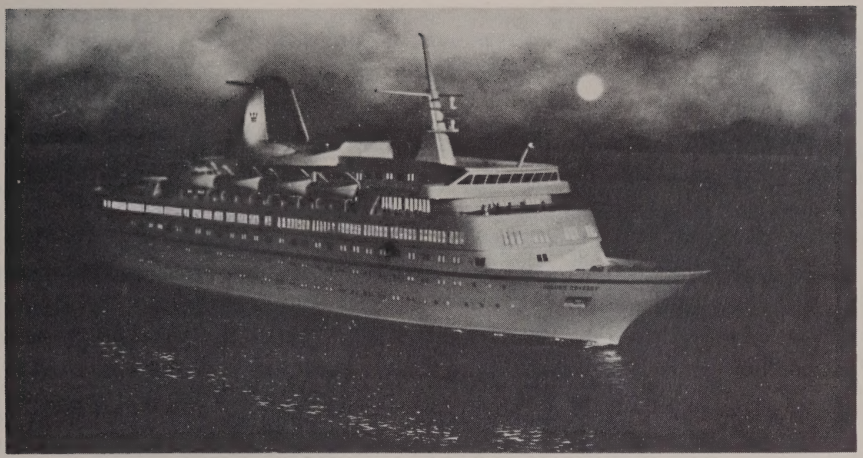

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P.S.R.O.
The Professional Intermediary

Let me first state that I do not think that anybody is qualified to completely define a P.S.R.O. After having been on the board of directors of The Foundation for Medical Care in our western Massachusetts region for the past 2½ years and in struggling to try and present to the various members of our own District Medical Society some sort of comprehensive definition of what a foundation is, I must say like many others I am at a loss for an adequate description. Yet, like many others, I wish to give it a try, and so in as few words as possible let's see if we can define these two organizations, and then talk about the second one, these being

1. The Western Massachusetts Health Care Foundation and
2. The Western Massachusetts P.S.R.O.

Simply stated the Foundation for Medical Care in our region is interested in becoming a comprehensive medical care delivery system. The Western Massachusetts P.S.R.O., as we define it, is a comprehensive medical care review system. The P.S.R.O. is going to work as a review body, it is going to work as a medical care evaluation body, and it will work as a cost containment body.

Having defined these three basic functions, I would now like to list those tasks necessary for the P.S.R.O. to become a viable, operating medical review system.

1. It must set itself up as a non-profit corporation, create a set of by-laws, create a board of directors and hire an administrator. (All of this has been done so far.)

2. It must enlist as much support as possible from all of the physicians in the region to become active, participating members in this P.S.R.O. entity.

3. It must contact all health providers in the area and explain to them what it is and what its purpose is. (Again, some of this has been done.)

4. It must create relationships with all of the hospitals and nursing homes in the area, develop guidelines for in-hospital utilization review committees and also guidelines for in-nursing home utilization review committees and working together with the hospitals and nursing home committees create a concurrent review system for all P.S.R.O. reviewed patients, those being title 18, 19 and 5. (This is in the process of being worked out now.)

5. It must recruit, train and put into operation an administrative section of the P.S.R.O. that can handle all of the necessary data systems of operations, review processes, and program administration as they arise.

6. The P.S.R.O. must develop and continuously update a medical care evaluation system including audit of records, development of assessment of care, updating of criteria, norms, and standards. It must further create an educational end product of all this medical care evaluation that will help health providers in the area to do the job as well as possible. It must also develop a section that can relate to the institutional patients in the areas of discharge planning, areas of better assessment or appropriateness of admissions, continued assessments of the necessity of continued stay and with health providers input assessment of local community facilities and capacities.

7. The P.S.R.O. should also develop systems for collection of data, for compiling and analyzing that data, and for creation of informational reports that can go to the fiscal intermediaries (again title 18, 19, and 5.)

8. The P.S.R.O. is to develop sub-contracts called "Memos of Understanding" with all these fiscal intermediaries, both federal and state, so that it can display to these agencies within the framework of the laws governing these agencies what the P.S.R.O. can do as a review body, medical care evaluation body, a cost containment body, and demonstrate how the P.S.R.O. can be a liason between the consumer and the fiscal agency.

9. Finally the P.S.R.O. to be effective must be able to show to its participating members what it is doing, what it has done and what it feels should be done for better medical care, this to include acting as a liason between Consumer, Provider and Fiscal Agency.

Having said all of this in what I hope is understandable terms, I feel reasonably sure that the same questions that have plagued you and me still plague you. So now you realize what the parts of a P.S.R.O. may be and what it is supposed to do, just how does it relate to your practice and to yourself specifically, now and in the future! Also why should you put time and effort into this type of program when you dislike governmental intervention and also object to and are suspicious of the vast heirarchy that any organization of this magnitude will obviously create?

It is interesting to me that the term "professional intermediary" was first stated to my knowledge by Dr. Michael Goran who is Director of the Bureau of Quality Assurance in the Department of Health, Education and Welfare. He defined this in contradistinction to fiscal intermediaries who all of us, at present, deal with private, state and governmental. He went on to state that at present, none of us as practicing physicians, osteopaths or health care providers, have a voice in what we will be paid by these fiscal intermediaries or whether we will be paid by them. We also have no voice in the formation of their rules or how they will define and implement their regulations. He then went on to say the P.S.R.O. was designed by law to become an organization that could have input on a local basis to the regional offices of the federal fiscal intermediaries, that could create, change and influence the decision-making capacities. Not only did he feel that it could influence the decision-making capacity but that the actual control of the decisions would be passed on to the well run P.S.R.O. from the fiscal intermediaries and left at a local level to be developed there.

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Neither you nor I are naive enough to believe that any governmental agency is going to give away power in any form without a fight or without a reason. Secondly, no federal agency is going to pay the type of dollars now being spent at present without some form of audit so that they too can defend their expenditures to the consumer. My feeling, therefore, is that in some ways P.S.R.O. may be a trade-off. It is my feeling that the powers that be in Washington feel that medical care evaluation, whether it be concurrent or retrospective, can be run best and properly only by physicians, and therefore it behooves the federal government to enlist their support to accomplish the audit. Thirdly, by developing comprehensive medical care review, I think the government can move onto the next step safely, that is to provide to all consumers some form of health insurance. Furthermore, I think that the federal government recognizes that the comprehensive medical care foundation movement in the country does solve another problem they have; that is the access of all consumers to health care providers. I think the federal people feel that if the foundations for medical care throughout the country develop comprehensive medical care delivery systems the accessibility of medicine will increase, the restlessness of the consumer will decrease and the satisfaction of the tax-payer with his federal government will increase in proportion. This is not to say that the cost for medical care on a total dollar basis, if it is extended to more people, will go down. I do not believe this will happen, but the cost to create the availability would not go up as rapidly as if the federal government had to build units throughout the breadth of this land to provide access for medical care in the future.

So you see, I feel there are reasons why P.S.R.O. is being offered. I also feel that for we professional health care providers the hour is late. If we do not take this opportunity to develop a utilization review system, a medical care evaluation system, an educational system, and a statistical data system, we may find very quickly that Uncle Sam is looking over our shoulder through non-professional reviewers as he has clearly stated he will do if there is no cooperation from the medical providers in every area.

For these reasons, I feel that Dr. Goran from Health, Education and Welfare probably was right, the P.S.R.O. is a professional intermediary and if we, as physicians and osteopaths, turn this western Massachusetts P.S.R.O. into a well-integrated, functioning medical care review unit with input from everybody who is willing to belong, we can influence and help our practice, our patients and out personal future as we enter into the next phase of national health insurance. I recommend that we all get behind the effort and give it a try.

* * *

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In Memoriam

Arthur J. Horrigan, M.D.
1891-1974

Dr. Arthur J. Horrigan of 30 Nassau Drive, Springfield, Massachusetts died at Mercy Hospital on September 3, 1974.

Born in Holyoke, Massachusetts on December 29, 1891, Dr. Horrigan received his doctorate of medicine from Jefferson Medical College in Philadelphia in 1916.

Dr. Horrigan was President of the Springfield Academy of Medicine from 1938 to 1939. He was Director of the Radiology Department at Providence Hospital for more than 20 years and Director of the Radiology Department of Mercy Hospital for more than 30 years.

Dr. Horrigan was honored for 50 years of service to medicine by the Massachusetts Medical Society and the Hampden District Medical Society in 1972.

He served in World War I as a Captain in the Medical Corps.

To his family, friends and associates deepest sympathy is extended.

Raymond J. Conway, M.D., 1915-1974

Dr. Raymond J. Conway of 190 Walnut Street, Holyoke, Massachusetts died at home on September 19, 1974.

Born in Holyoke, Massachusetts on March 22, 1915, Dr. Conway received his education in Holyoke schools and his pre-medical education at the University of Massachusetts. His doctorate of medicine was from Boston University in 1941. After serving an internship at Mercy Hospital in Springfield and a residency at Boston City Hospital, Dr. Conway entered in the private practice of medicine in Holyoke. His practice was devoted to the practice of otolaryngology.

Dr. Conway served his country for five years in the United States Army.

Deepest sympathy is extended to his family, friends and associates.

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Hampden Capsules

Dr. Setrag A. Zacarian, Director of Dermatology Service of the Springfield Medical Center was one of five dermatologists in the United States to participate in a Dermatologic Cryosurgical Seminar held in New Orleans, October 5-7, 1974. He is Assistant Clinical Professor of Dermatology at Boston University School of Medicine and Lecturer in Dermatology at Tufts Medical School.

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Social Chairwoman	Mrs. William Yorzyk
Sunshine	Mrs. Howard Trachtenberg
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White Cap Ball	Mrs. Joseph Stirlacci

Program of the Hampden District

Tuesday, October 1, 1974

Fall Luncheon — First Church of Christ, Longmeadow
Program: 10.00 a.m. Meeting
Address by State Representative Iris Holland
Social Hour: Musical Program by Lillian McCarthy
Luncheon: 12.00 Noon
Chairwoman: Mrs. Sante Caldarola
Baby sitters will be provided at church.

Saturday, November 2, 1974

White Cap Ball — Scholarship Dinner Dance
Kimball Towers
Springfield
Chairwoman: Mrs. Joseph Stirlacci
Co-Chairwoman: Mrs. Setrag Zacarian

Tuesday, December 10, 1974

Hampden District Joint Meeting
Mass. Medical Society and
Women's Auxiliary
Meeting — 6:00 p.m. Yankee Peddlar Inn, Holyoke
Opera House
Social Hour
Dinner
Guest Speaker: Dr. Richard Egdall
New Trends in Health Care
Chairwoman: Mrs. Vivian Purdy

Program of the Hampden District

Thursday, February 13, 1975

7:00 P. M. — Valentine Party for residents of
Springfield Municipal Hospital
Musical program by the American
Federation of Musicians
Chairwoman: Mrs. Peter Krokidas

Wednesday, March 5, 1975

Art Auction
Benefit A.M.A.E.R.F.
Time and place to be announced
Chairwoman: Mrs. Gregory Gallivan

Tuesday, April 29, 1975

Annual Meeting — Valley Bank Tower Building
Business Meeting: 10:00 a.m. Bruce McLoud
Community Room
Guest Speaker: Mr. Andrew Skroback, trust officer for
Valley Bank
Installing Officer: Mrs. Richard Lavigne
Luncheon: Hospitality Room 28th floor
Program: Mini Fashion Show by "Dave's Girls"
of Hampden
Chairwomen: Mrs. Robert Bye
Mrs. Anthony Lovell

Publicity Guide

OF THE

Massachusetts Medical Society

ADOPTED 1949, REVISED MAY 22, 1961

PREFACE

In reporting medical news, representatives of the press, radio and television look to physicians for accurate and authoritative information. It is recognized and accepted that the physician serving as a source of information will, in most instances, be quoted and identified.

When so serving as an authority, a physician should conform with ethical decisions reached by the staffs of hospitals with which he is affiliated and by the professional organizations to which he belongs. In all cases the emphasis should be placed on the service rendered and work done rather than on the identified fellow.

The following guide is designed to serve as a reference for fellows of the Massachusetts Medical Society in their relation with the press, radio and television. A fellow in doubt concerning the propriety of his actions relative to matters of publicity not covered in this guide should refer his problem to the appropriate committee of his district society or to the Committee on Ethics and Discipline of the Massachusetts Medical Society.

RADIO, TELEVISION AND RECORDINGS

(1) A fellow invited to appear as a *representative of the Society* on programs not sponsored or arranged by the Society should first obtain approval from the Society. Requests for such approval should be forwarded to the Secretary, Massachusetts Medical Society, 22 The Fenway, Boston, Mass. 02215.

(2) A fellow need not obtain approval from the Society for radio or television appearances in the following instances:

(a) In a capacity other than as a practitioner of medicine (e.g., as medical examiner, civic club officer, public health official, school board member).

(b) As a representative of a staff of a hospital, dispensary, sanatorium or clinic. His appearance should be approved by the chief of staff or the chief of the appropriate service and by the director.

(c) As a representative of a medical school or medical society other than the Massachusetts Medical Society or any of its constituent district medical societies. His appearance should be approved by the appropriate authority in the medical school or medical society.

PRESS

(1) A fellow acting in a capacity other than as a representative of his profession does not require approval from the Society for newspaper articles and statements that he may be requested to write or make in connection with his responsibilities as a citizen.

(2) A fellow serving as a spokesman for a medical school or professional group other than the Society or any of its constituent district societies should obtain approval for newspaper articles, statements or interviews from the group that he is representing.

(3) A fellow asked to report for the press on research that he has done, findings that he has made or other newsworthy matters connected with his practice should first obtain permission from (1) the chief of staff or appropriate service of the hospital and hospital director, (2) the head of a major department or research organization, or (3) the dean of a medical school or someone specifically designated by him for this purpose.

(4) A fellow speaking on professional subjects at meetings sponsored by medical organizations may consent to interviews with the press arranged by the organization.

(5) A fellow should not release information to the press on matters pertaining to his district or state society without prior approval from the appropriate committee or officers.

(6) A fellow in announcing the establishment of his practice should adhere to the custom established by precedent in his community.

(7) A fellow in his statements, articles and interviews with the press should avoid excessive mention of his professional qualifications in identifying himself.

PRESS, RADIO, TELEVISION COVERAGE OF HOSPITALIZED PATIENTS

In the release of information to the press, radio or television relative to hospitalized patients a fellow should follow, where they are applicable, the appended *Principles of Hospital-Press-Radio-TV Cooperation* of the Massachusetts Hospital Association.

TALKS BEFORE LAY GROUPS

A fellow requested to speak on medical subjects before a lay group should be governed by the principles outlined in this guide.

A fellow whose statements have not been approved by the proper authorities as defined in this guide will be held responsible for the content and accuracy of such statements.

Poet's Corner

Rubaiyat

Leaving this enchanting world my beloved when you pass
Shall I say goodbye with stars scattered on the grass
As long as you and I walk in this glorious journey of life
When you filled the flask and I make one turn down the empty glass.

I. B. Syed

Ed's Note: A Rubaiyat is a four line piece of poetry in which a mood or a feeling is expressed succinctly but emotionally. Omar Khayyam's are best known.

* * *

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Letters to the Editor

Dear Dr. Stevens:

On behalf of the Woman's Auxiliary, may I say "thank you" to the board of editors of the *Hampden Hippocrat* for responding favorably to our request for space for a monthly article.

Hopefully we shall have worthwhile contributions every month to warrant your allotting this space to "Auxiliary Happenings" for auxiliaries who might have something of importance and interest to convey to the Society.

Sincerely,
Patricia Twible

Dear Dr. Stevens:

Thank you for taking time to visit with me yesterday and discuss the editorial views of The Hampden Hippocrat board. I appreciate your suggestions as to how we might effectively make our organization better known in Hampden County.

After I have had the opportunity to review this matter with John J. Casey, our president, I will get back to you and let you know how we plan to proceed.

Sincerely,
Jack C. Andrellos
Divisional Vice President
New England Physicians Retirement Services, Inc.

Dear Sir:

I noticed in the June-July issue that you have not yet assigned a topic to your March, 1975, issue. I would offer the topic of "Emergency Medical Services—What's Happening" as a possibility.

Numerous committees are meeting in the County and throughout the State, training programs have been instituted for Emergency Medical Technicians and Emergency Department Nurses. There is a seminar being planned on Emergency Medicine for physicians working in Emergency Departments. Hospitals are studying their capabilities in Emergency Departments. Communications systems are being designed and installed in Western Massachusetts. Public education programs are being planned.

There is a great deal to write about and I think it would be a good idea to bring your physicians up-to-date.

If you decide that you are interested in the topic and would like more information, I would be happy to provide you with more information.

Sincerely,
Gary Bunce
Assistant Director—EMS

Landen-True
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(Letters, cont.)

Dear Miss Purdy:

A beautiful day allowed thirty (30) to play golf in the H.D.M.S. Tournament. Twenty-three sat down to dinner.

Trophies and golf balls presented by Abbott Laboratories and trophies donated by the Marion Laboratories plus golf balls which we purchased allowed all ample prizes.

Four of our surrounding towns were represented at this party which was disappointing.

I appointed an ad hoc committee consisting of:

Donald Wetherbee
Joseph Stirlacci
Harry Tapp
William Beachman
Joseph Baker

to study ways to make this a more representative occasion.

I would thank the society for our very nice trophies.

Very sincerely,
Harry L. Roberts, M.D.

* * *

View on the PLAZA

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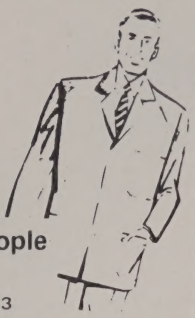

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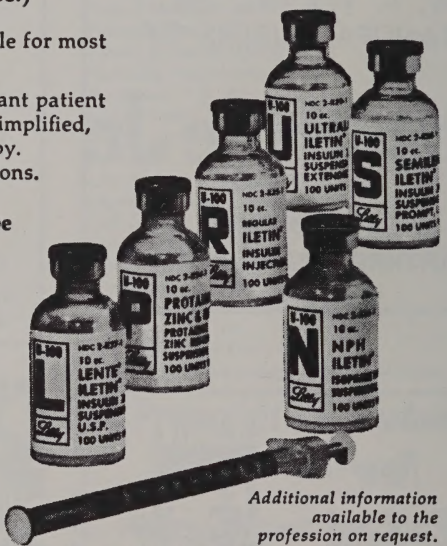

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